Date of Hearing: April 16, 2013

ASSEMBLY COMMITTEE ON VETERANS AFFAIRS Al Muratsuchi, Chair AB 704 (Blumenfield) – As Introduced: February 21, 2013

SUBJECT: Emergency medical services: military experience.

<u>SUMMARY</u>: Requires the Emergency Medical Services Authority (EMSA) to adopt regulations by January 1, 2015 to accept the military education, training, and practical experience of applicants, as specified, towards certification as an Emergency Medical Technician (EMT)-I and EMT-II, and towards licensure as an EMT-Paramedic (EMT-P). Specifically, this bill:

- 1) Requires the EMSA to develop and adopt regulations by January 1, 2015, to accept, upon presentation of satisfactory evidence, the military education, training, and experience for applicants as a member of the United States (U.S.) Armed Forces, the U.S. Military Reserve, the National Guard of any state, or the Naval Militia of any state, towards meeting requirements for the EMT-I certificate, the EMT-II certificate, and the EMT-P license.
- 2) Requires the EMSA, in developing the regulations, to deem an applicant for EMT-II certification with military experience equivalent to EMT-I certification requirements as EMT-I-certified, unless the EMSA determines that the military education, training, or practical experience is not sufficiently comparable to existing standards.
- 3) Prohibits the EMSA, in developing the regulations, from requiring an applicant for EMT-P licensure with military experience equivalent to relevant coursework to complete duplicative requirements, unless the EMSA determines that the military education, training, or practical experience is not sufficiently comparable to existing standards.

EXISTING LAW:

- 1) Requires the EMSA to develop and adopt regulations and minimum standards for the training and scope of practice of an EMT-I, EMT-II, and EMT-P. (Health and Safety Code [HSC] Sections 1797.170, 1797.171, 1797.172)
- 2) Authorizes an individual applying for EMT certification to challenge EMT course completion requirements if the individual provides evidence that the following occurred in the preceding two years:
 - a) Completed an emergency medical service training program of the U.S. Armed Forces which meets the specified United States Department of Transportation EMT-Basic National Standards Curriculum; or,
 - b) Was active in a pre-hospital emergency medical classification of the U.S. Armed Services which does not have formal certification requirements. (CCR 100078)
- 3) Creates the following definitions:

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- a) "Emergency Medical Technician-I" or "EMT-I" to mean an individual trained in all facets of basic life support according to prescribed standards. (HSC 1797.80 and CCR 100063).
- b) "Emergency Medical Technician-II," "EMT-II," "Advanced Emergency Medical Technician," or "Advanced EMT" means an EMT-I with additional training in limited advanced life support according to prescribed standards. (HSC 1797.82 and CCR 100063)
- c) "Emergency Medical Technician Paramedic," "EMT P," "paramedic" or "mobile intensive care paramedic" means an individual whose scope of practice to provide advanced life support is according to prescribed standards. (HSC 1797.84 and CCR, Title 22, Division 9, Chapter 4, Section 100145)

FISCAL EFFECT: Unknown at this time.

COMMENTS:

According to the author:

Upon exiting military service, our nation's recent veterans face a higher unemployment rate than their civilian counterparts. Many veterans are unable to transfer their military training and experience into marketable job skills for civilian careers. This should not be a problem for veterans who served as medics given the high-quality education and experience they obtained in the military. Unfortunately, California does not offer credit for this specialized background towards civilian licensure.

Veterans with medical training make up the second largest specialty in the military and cannot transfer their training and experience towards EMT [certification] or paramedic licensure, despite similarities in the training and experience of comparable positions, such as a combat medic. As a result, these veterans must retake courses which they have already taken, costing them additional time and money.

AB 704 will allow these veterans to use their training and experiences to be credited towards paramedic licensure, and streamline veterans with equivalent experience to fill much-needed jobs in the healthcare field.

According to the Business and Professions Committee:

1) <u>EMT Certification and Paramedic Licensure</u>. There are currently 60,000 EMTs and 19,000 paramedics in California. The EMS system and EMTs are the "first responders", usually activated by a 911 call, who stabilize and transport individuals to a medical facility for treatment.

This bill applies to two types of EMT certifications (EMT-I and EMT-II) and one type of paramedic license (commonly referred to as EMT-P). There are some notable differences between the certifications and the license:

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- a) In California, EMT-I and EMT-IIs are certified by one of the 32 local (single- or multi-county) EMS agencies. The local EMS agency reviews an applicant's documentation, including his or her course completion record, out-of-state certification, and National Registry card, to determine whether or not he or she meets state and local requirements. Local EMS agencies have broad discretion in accepting or denying an EMT applicant, and in determining whether or not it will accept military experience towards certification.
- b) EMT-Ps (or paramedic licenses), are issued by the EMSA and then accredited by a local EMS agency to work in a county once the paramedic is sponsored by a local advanced life support provider/employer.
- 2) <u>Acceptance of military experience towards EMT certification</u>. Currently, there are two pathways for veterans to count military experience towards EMT certification:
 - a) <u>National Registry of EMTs</u>. The National Registry of EMTs is a nationwide certification agency with uniform standards for training and examination of personnel delivering emergency ambulance services. An individual must complete an approved U.S. Department of Transportation (U.S. DOT) training program, be cardiopulmonary resuscitation (CPR)-certified, and pass a practical and skills examination in order to receive a National Registry card.

The National Registry of EMTs provides certification in four EMT classifications: Basic, Intermediate-85, Intermediate-99, and Paramedic. California offers EMT certification by endorsement to out-of-state applicants holding a National Registry card and seeking certification in the state. This provision would therefore apply to military members who hold a National Registry card. Currently, the U.S. Army is the only branch of the U.S. Armed Forces that requires all of its military medics to obtain a National Registry card. According to the EOP report, "...medics in the Army are required to pass the EMT national certification at the conclusion of their technical training in the health sciences and maintain the certification while they remain in that military occupational specialty. Air Force medics may take the exam but are not required to pass it."

b) Waiver from training requirements. Existing state regulations allow a military veteran applying for EMT certification within two years of leaving military service to seek a waiver from training requirements. A local EMS agency would review the applicant's military transcripts to determine whether the military coursework is equivalent to the accepted standard of the U.S. DOT training course. If the local EMS agency determines that the military experience is equivalent, the applicant is exempt from taking an approved U.S. DOT training course.

Unless an individual holds a current National Registry EMT-Basic card, the applicant must take a written and skills examination and possible additional training specified by the local EMS agency. Therefore, a military veteran from any branch of the U.S. Armed Forces other than the Army may still need to complete additional training and examination requirements as determined by the local EMS agency.

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Currently, there are no laws or regulations requiring EMSA to accept military education, training, or experience for the paramedic license.

This bill will take the existing consideration of military experience for the EMT certification to the next level by requiring regulatory development for those servicemembers not in the U.S. Army. Those members do not receive the National Registry card but their training is still worthy at least of consideration toward certification and credit if found to be appropriate by EMSA.

For paramedics, again it makes sense that EMSA should at least consider and credit, as appropriate, the military training and experience of paramedic license applicants. EMSA currently has a system in place for consideration of paramedic applications from out of state and out of country applicants. It seems reasonable that the same or a similar system could accommodate military trained applicants.

REGISTERED SUPPORT / OPPOSITION:

Support

Association of California Healthcare Districts California Association of County Veterans Service Officers California Professional Firefighters California State Firefighters' Association, Inc. Vietnam Veterans of America, California State Council

Opposition

None at this time.

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